



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – Governor
RICHARD M. ARMSTRONG – Director

DEBBY RANSOM, R.N., R.H.I.T – Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, Idaho 83720-0036
PHONE: (208) 334-6626
FAX: (208) 364-1888
E-mail: fsb@idhw.state.id.us

January 31, 2007

Jared Nye, Administrator
Aarenbrooke Place - Cory Lane, Ashley Manor LLC
9327 Cory Lane
Boise, ID 83704

License #: RC-718

Dear Mr. Nye:

On December 21, 2006, a life safety code survey was conducted at Aarenbrooke Place-Cory Lane, Ashley Manor LLC. As a result of that survey, deficient practices were found. The deficiencies were cited at the following level(s):

- Non-core issues, which are described on the Punch List, and for which you have submitted evidence of resolution.

This office is accepting your submitted evidence of resolution.

Should you have questions, please contact Chris Laumann, Health Facility Surveyor, Facility Fire, Life Safety, and Construction Program, at (208) 334-6626.

Sincerely,

CHRIS LAUMANN
Team Leader
Health Facility Surveyor
Facility Fire Safety & Construction Program

CM/slc

c: Mark Grimes, Supervisor, Facility Fire Safety & Construction Program



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December 28, 2006

Jared Nye, Administrator
Aarenbrooke Place-Cory Lane, Ashley Manor LLC
9327 Cory Lane
Boise, ID 83704

Dear Mr. Nye:

On December 21, 2006, a life safety code survey was conducted at Aarenbrooke Place-Cory Lane, Ashley Manor LLC. The facility was found to be providing a safe environment for its residents.

The enclosed form, stating no core issue deficiencies were cited during the survey, is for your records only and need not be returned.

Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference. The completed punch list form and accompanying proof of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by January 20, 2007.

Should you have any questions about our visit, please contact me at (208) 334-6626.

Sincerely,

A handwritten signature in black ink, appearing to read "Grimes" followed by "for".

MARK GRIMES
Supervisor
Facility Fire Safety & Construction Program

MG/slc

Enclosure

Bureau of Facility Standards

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 13R718	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ENTIRE BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED 12/21/2006
NAME OF PROVIDER OR SUPPLIER AARENBROOKE PLACE - CORY LANE, ASHLE		STREET ADDRESS, CITY, STATE, ZIP CODE 9327 CORY LANE BOISE, ID 83704		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R 000	<p>Initial Comments</p> <p>The facility was found to be in substantial compliance with the fire and life safety requirements of the Rules for Residential or Assisted Living Facilities in Idaho. No core deficiencies were cited during the standard fire/life safety survey conducted on December 21, 2006.</p> <p>The surveyor conducting the survey was:</p> <p>Chris Laumann Health Facility Surveyor Facility Fire safety & Construction</p>	R 000		

Bureau of Facility Standards

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM

6899

QQQ121

If continuation sheet 1 of 1



IDAHO DEPARTMENT OF
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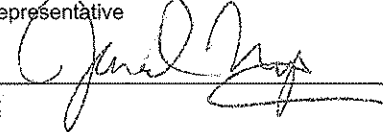
BUREAU OF FACILITY STANDARDS
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ASSISTED LIVING
Non-Core Issues
Punch List

Facility Name Aarenbrooke Place,	Physical Address 9327 Cory lane.	Phone Number (208) 376-1300
Administrator Jared Nye	City Boise, Idaho	ZIP Code 83704
Survey Team Leader Chris Laumann.	Survey Type Fire/Life Safety	Survey Date 12/21/2006

NON-CORE ISSUES

ITEM #	RULE # 16.03.22	DESCRIPTION	DATE RESOLVED	BFS USE
1.	415.01	Maintaining equipment and systems for fire safety. The exit sign above the A hall door entrance was burnt out. The exit sign above the C Hall door was burnt out. The kitchen emergency light was imp. The fire doors smoke doors leading to D wing did not fully close when tested. The smoke doors leading to B hall not fully securing as required.		
2.	404.01	Protection from Hazardous areas. 4 holes penetrated the ceiling of the room compromising the required barrier (separation). Six penetration of the barrier on the floor were found as well. The Oxygen transferring room was found integrated to not fully close and latch when released. Maintaining the integrity of the corridor. The door to the Room did not latch as required.		

Response Required Date 1/21/07	Signature of Facility Representative 	Date Signed 12/21/06
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ASSISTED LIVING
Non-Core Issues
Punch List

Facility Name <u>Aurenbroske Place</u>	Physical Address <u>9327 Cary lane</u>	Phone Number <u>(608) 376-1300</u>
Administrator <u>Jared Nye</u>	City <u>Boise, Id.</u>	ZIP Code <u>83704</u>
Survey Team Leader <u>Chris Loumann</u>	Survey Type <u>Fire/Life Safety</u>	Survey Date <u>12/21/2006.</u>

NON-CORE ISSUES

ITEM #	RULE #	DESCRIPTION	DATE RESOLVED
3	404.01	<u>Corridor doors.</u> Resident room doors cannot be held open with rubber door stops. The doors to rooms 6, 8, 102, 113, 123, and 17 were all held open with door stops.	
4	415.01	<u>Maintenance of systems:</u> To ensure safety. The Storage area in the kitchen had items stacked within an inch of the ceiling disrupting the coverage of the Sprinkler head.	
5	405.3	<u>Electrical equipment.</u> An extension cord was found on the nurses station providing power to three appliances. Another extension cord was found in Rm. 10 and a multi plug adapter was found in the same room powering various appliances.	

Response Required Date

1/21/07

Signature of Facility Representative

[Signature]